

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>PAI</i>	<i>77591</i>	<i>7/21</i>
O.I.P.E. CLASSIFIER		<i>10</i>	<i>7-26-00</i>
FORMALITY REVIEW	<i>CS</i>	<i>804</i>	<i>08/31/00</i>
RESPONSE FORMALITY REVIEW	<i>UC</i>	<i>907</i>	<i>3-16-01</i>

INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted                      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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Best Available